

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1379216

OMB APPROVAL

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	tion 4(6) ULOE	
ENTIFICATION DATA	<u> </u>	
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nd Street, City, State, Zip	Code) Telephone N (203) 552-	lumber (Including Area Code)
nd Street, City, State, Zip	Code) Telephone N	lumber (Including Area Code)
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• –	other (please specify):	PROCESSED
tal Service abbreviation	for State:	THOMSON FINANCIAL
o D ng	Alue \$0.001 05 Rule 506 Second Secon	OS Rule 506 Section 4(6) ULOE DENTIFICATION DATA Inged, and indicate change.) and Street, City, State, Zip Code) Telephone N (203) 552- and Street, City, State, Zip Code) Telephone N and Street, City, State, Zip Code) Telephone N and Street City, State, Zip Code) Telephone N and Street City, State Exip Code Telephone N and Street City Exip Code Telephone N

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (5-05)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

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	A. BASIC IDE	NTIFICATION DATA		
2. Enter the information requested for th				
Each promoter of the issuer, if the				
• Each beneficial owner having the p	ower to vote or dispose, or dire	ect the vote or disposition of	, 10% or more of	a class of equity securities of the issuer.
Each executive officer and director	or of corporate issuers and of	corporate general and man	aging partners of	partnership issuers; and
Each general and managing parts				
Check Box(es) that Apply: Promote	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Ramsay, Brian E.			,	
Business or Residence Address (Number as c/o Littlejohn & Co. LLC, 115 East Pu	nd Street, City, State, Zip Co utnam Avenue, Greenwic	de) h, CT, 06830	<u>.</u>	
Check Box(es) that Apply: Promote	er Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Klein, Michael I.				
Business or Residence Address (Number a c/o Littlejohn & Co. LLC, 115 East Po	nd Street, City, State, Zip Co utnam Avenue, Greenwic	ode) h, CT, 06830		
Check Box(es) that Apply: Promote	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Groetsch, David W.				
Business or Residence Address (Number a 858 Hycinth Crt., Marco Island, FL, 3		ode)	· · · · · ·	
Check Box(es) that Apply: Promote	er Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Randall, Keith G.				
Business or Residence Address (Number a 20213 Blue Stem Lane, Parker, CO, 8		ode)		
Check Box(es) that Apply: Promote	er Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Littlejohn Fund III, L.P.				
Business or Residence Address (Number a c/o Littlejohn & Co. LLC, 115 East P	nd Street, City, State, Zip Coutnam Avenue, Greenwh	ode) ich, CT 06830		
Check Box(es) that Apply: Promot	er Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			·	
Business or Residence Address (Number a	and Street, City, State, Zip C	ode)		
Check Box(es) that Apply: Promot	er Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number a	and Street, City, State, Zip C	ode)		
<u> </u>				American LegalNet, Inc.

				B. INI	ORMATIC	ON ABOUT	OFFERI	NG				
											Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										\boxtimes		
	Answer also in Appendix, Column 2, if filing under ULOE. \$ 20,000.00											
2. What is the minimum investment that will be accepted from any individual?									\$ 20,000.00 Yes	No		
										×		
3. Does th	Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any									lv. anv		_
	nian ar cimi	lar remuner	ation for so	licitation of	f nurchasers	in connecti	on with sai	es of securi	ties iii tile oi	termg.		
16	on to be liet	ed ic an acc	ociated pers	on or agen	t of a broker	or dealer re	egistered w	im me sec	and/or with	a state		
or state:	If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.											
Full Name (I												
Business or				reet City.	State, Zip C	ode)						
										<u>. </u>	·	
Name of Ass												
States in Wh											🗆 A	II States
· (Che	ck "All Stat	es" or check	individual	States)				······				
AL	AK	ΑZ	AR	CA	CO	<u> </u>	DE	DC	FL	GA	HI	ID
ĨL]	[N]	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
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Full Name (
Business or	Residence A	Address (Nu	mber and S	treet, City,	State, Zip C	Code)		_			 	
Name of As	sociated Bro	oker or Deal	er									
States in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Purc	hasers						
(Che	eck "All Star	tes" or check	c individual	States)								All States
AL	ĀK	ΑŽ	AR	CA	co	СТ	DE	DC	FL	ĴΑ	HI	ID
رت]	[N]	ĪA	KS	ΚΥ	LA	ME	MD	MA	MI	MM	MS	MO
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MT	NE	₹ ∨	NH				VA		WV	WI]	WY	PR
, [R1]	SC	SD	IN	TX	υī	VΤ	VA	WA	<u> </u>		<u> </u>	لثنا
Full Name	(Last name	first, if indiv	vidual)									
Business or	r Residence	Address (N	umber and S	Street, City	, State, Zip (Code)	<u> </u>		<u> </u>		m.v.v.	
		<u> — </u>		 	 				·		·	
	ssociated Br									 		
States in W	hich Person	Listed Has ites" or chec	Solicited of k individua	r Intends to I States)	Solicit Purd	hasers					🗆	All States
[AL]	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	iD
<u> </u>	[N	ĪĀ	KS	ΚY	LA	ME	MD	MA	MI	MN	MS	МО
IL					\equiv		=	=	ОН	рκ	OR	PA
МТ	NE	ΨV	NH	נא	NM	VY	NC	ND		_	wy	PA PR
RI	SC	SD	מז	TX	UT	VT	VA	WA	wy	wi	<u> </u>	[PK]

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/I Ioo blook sheet	Ar cany and lice additional	comies of this succu.	45 HCCC3341 Y. I

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and				
	Type of Security	Aggregate Offering Price	,	Amount Alrea Sold	dy
		0	•		0
	Debt				_
i	Equity	02,399,701	. →.	02,377,70	-
	Common Preferred	^	_		۸
i	Convertible Securities (including warrants)\$				0
	Partnership Interests				<u> </u>
!	Other (Specify \$	0	•		0
	Total\$	62,399,761	. \$	62,399,76	<u>·1</u>
	Answer also in Appendix, Column 3, if filing under ULOE.				
2 .¦	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate	
,		Number Investors		Dollar Amous of Purchases	nt
	Accredited Investors	13	. :	62,399,7	761
	Non-accredited Investors		. :	s	0
	Total (for filings under Rule 504 only)		:	62,399,7	761
	Answer also in Appendix, Column 4, if filing under ULOE.				
3 .	and the second s				-
	Type of Offering	Type of Security		Dollar Amo Sold	unt
	Rule 505	· 0		s	0
	Regulation A			s	0
i	Rule 504			s	0
'	Total	0		s	0
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
1	Transfer Agent's Fees] 9	5	0
	Printing and Engraving Costs	[] :	S	0
	Legal Fees	_	9	100,	000
ŀ	Accounting Fees] :	s	0
	Engineering Fees	_] :	s	0
,	Sales Commissions (specify finders' fees separately)] :	\$	0
	Other Expenses (identify)] :	s	0
	Total] :	s 100,	000
i	. 4.4				

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	C. OFFERING PRICE, NUM	VIBER OF INVESTORS, EXPENSES AND USE OF	PKC	CEEDS				
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C – proceeds to the issuer."	 Question 4.a. This difference is the "adjusted gross 				s _	6	2,299,761
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Part	ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gros	d					
			l	Payments	to			
			-	Officers,			В	
		•		Directors, a Affiliates	¥.		•	ments to Others
•	Salaries and fees			5	0	\Box		
	Purchase of real estate							0
	Purchase, rental or leasing and installation of ma		ш,	▶	<u> </u>	ш	•	
	and equipment		\Box	s	0	П	\$	0
	Construction or leasing of plant buildings and fac						_	0
1	Acquisition of other businesses (including the va		`		<u> </u>		*-	<u>-</u>
	offering that may be used in exchange for the ass	ets or securities of another						
,	issuer pursuant to a merger)							
	Repayment of indebtedness					_		
:	Working capital							
	Other (specify):			\$	_0		s _	0
;								
				<u> </u>	_0		\$	0
1	Column Totals		X :	4,920,5	543	\boxtimes	s _:	57,379,218
,	Total Payments Listed (column totals added)				\$ <u>6</u>	2,29	9,76	<u>51</u>
٠		D. FEDERAL SIGNATURE						
igi ie	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furnished by the issuer to any non-accordance.	ne undersigned duly authorized person. If this notice rnish to the U.S. Securities and Exchange Commis	ssion	, upon wr	Rule	e 50: requ	5, the	e following of its staff,
•	er (Print or Type) Can Holdings, Inc.	Signature & Rowley	Dat	° 10	(7	4	0	b
_	ne of Signer (Print or Type)	Title of Signer (Print or Type)				<u> </u>		
	th G. Randall	Secretary, Treasurer and Chief Financial Off	icer					
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ATTENTION ________ Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

(E. STATE SIGNATURE								
į 1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?									
	See	Appendix, Column 5, for state response.								
2.	The undersigned issuer hereby undertakes to f D (17 CFR 239.500) at such times as require	urnish to any state administrator of any state in which this notice is filed a notice on Formed by state law.								
[!] 3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	limited Offering Exemption (ULOE) of the st	suer is familiar with the conditions that must be satisfied to be entitled to the Uniform ate in which this notice is filed and understands that the issuer claiming the availability ing that these conditions have been satisfied.								
	er has read this notification and knows the conte horized person.	ints to be true and has duly caused this notice to be signed on its behalf by the undersigned								
Issuer (Print or Type)	Signature Date								
LJ Can	Holdings, Inc.	1800 Rawow 10/12/09								
Name (Print or Type)	Title (Print or Type)								
Keith C	6. Randail	Secretary, Treasurer and Chief Financial Officer								

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				API	PENDIX	· · · · · · · · · · · · · · · · · · ·			
1	to non-	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			under St (if yes explan waiver	5 lification ate ULOE s, attach eation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
ĄL		Х.		0		0			х
AK		х		0		0			х
AZ		Х		0	-	0			х
ÄR		х		0		0			х
ÇA		х		0		0			х
СО		х		0		0			х
СТ		х		0		0			х
DE		х		1		0	_		х
DC		х		0		0			х
FL		х		0		0			х
GA		х		0		0			х
НІ		Х		0		0			х
,ID		х		0		0			х
IL.		х		0		0			х
IN		х		0		0			х
ΊΑ		х		0		0			х
KS		х		0		0			х
KY		х		0		0			х
LA		Х		0		0			Х
ME		Х		0		0			Х
MD		х		0		0			х
МА		х				0			Х
MI		х		0		0 .			х
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MS		х		0		0			Х

•				API	PENDIX				
1	Intend to non-a investor	2 it to sell accredited es in State (-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 lification ate ULOE s, attach lation of granted) s-Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
МО	<u> </u>	Х		0		0			х
МТ		х		0		0			х
NE		х		0		0			х
ΝV		Х		0		0			х
NH		Х		0		0	-		х
ĺИ		х		0		0			х
NM		x		0		0			х
NY		Х		1		0			х
NC		Х		0		0			х
ND		х		0		0			х
ОН		х		0		0			х
ок		х		0		0			х
OR	-	х	-	0		0			х
PA		х	-	0		0			х
RI		х		0		0			х
sc		Х		0		0			х
SD		Х		0		0			х
TN		Х		0		0			х
TX		Х		0		0			х
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VT		Х		0		0			х
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WA		х		0		0			х
wv		х		0		0			х
WI	-	х		0		0			х

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				APF	ENDIX				
investors in State offered in state amount purchase					4 of investor and purchased in State		under St (if yes explan waiver	Sification ate ULOE is, attach ation of granted)	
State	(Part I	3-Item 1)	(Part C-Item 1)	Number of Accredited Investors	(Pa	Number of Non- Accredited Investors	Amount	Yes	No
WY	<u>-</u>	х		0		0	· · · · · · ·		Х
PR	· 	Х		0		0			х